Image# 12950229096 PAGE 1 / 7

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

'	- Other man All All	dinorized Committe			Office Use Only
1. NAME OF COMMITTEE (in full)	YPE OR PRINT ▼	Example: If typir over the lines.	ng, type	12FE4M5	
National Association of I	Rehabilitation Pro	viders &Agencies	Inc. Poli	tical Actior	Committee
ADDRESS (number and street)	1 Park West Circle				
Check if different	Suite 108				
than previously reported. (ACC)	Midlothian			VA _	23114
2. FEC IDENTIFICATION NUM	IBER ▼ C	CITY <b>A</b>		STATE 🛦	ZIP CODE ▲
C C00192153	3.		IEW N) <b>OR</b>	AM (A)	ENDED
4. TYPE OF REPORT (Choose One)	(b) Monthly February	eb 20 (M2)	May 20 (M5)	Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:	M	` '	lun 20 (M6)	H	20 (M9) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1)			Jul 20 (M7)		20 (M10) Jan 31 (YE)
July 15 Quarterly Report (Q2)	(c) 12-Day  PRE-Election  Report for the:	Primary (12P		General (	
October 15 Quarterly Report (Q3)		Convention	120)	opeoidi (	120)
X January 31 Year-End Report (YE)	Elec	etion on	D   D /	Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day  POST-Election  Report for the:	General (300	à)	Runoff (3	0R) Special (30S)
Termination Report (TER)		etion on	D D /	Y = Y = Y = Y	in the State of
5. Covering Period 07	01 2011	through	M M	31	2011
I certify that I have examined this	•	of my knowledge and b	pelief it is tru	ue, correct and	complete.
Type or Print Name of Treasurer	Ted Botens				
Signature of Treasurer Ted Bota	ens	[Electronically	Filed] [	Date 01	/ D D / Y Y Y Y Y 2012
NOTE: Submission of false, erroneon	us, or incomplete informati	tion may subject the pers	son signing tl	nis Report to th	e penalties of 2 U.S.C. §437g.
Office Use Only					FEC FORM 3X Rev. 12/2004

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### National Association of Rehabilitation Providers & Agencies Inc. Political Action Committee

2011 2011 Report Covering the Period: 12 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 16629.45 January 1, 2011 (b) Cash on Hand at 18179.45 Beginning of Reporting Period..... 1550.0 0.0 Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 18179.45 18179.45 6(a) and 6(c) for Column B)..... 4000.0 4000.0 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 14179.45 14179.45 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.0 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.0 Schedule C and/or Schedule D) .....

×

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

#### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

#### National Association of Rehabilitation Providers & Agencies Inc. Political Action Committee

Report Covering the Period: From: 07	01 2011 To			
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
. Contributions (other than loans) From:				
(a) Individuals/Persons Other				
Than Political Committees	0.0	1000.0		
(i) Itemized (use Schedule A)	0.0	1.0000		
(ii) Uniterpized	0.0	550.0		
(ii) Unitemized(iii) TOTAL (add	0.0	330.0		
Lines 11(a)(i) and (ii)	0.0	1550.0		
Lines Tr(a)(i) and (ii)	, , , , , ,			
(b) Political Party Committees	0.0	0.0		
(c) Other Political Committees				
(such as PACs)	0.0	0.0		
(d) Total Contributions (add Lines				
11(a)(iii), (b), and (c)) (Carry				
Totals to Line 33, page 5)▶	0.0	1550.0		
. Transfers From Affiliated/Other				
Party Committees	0.0	0.0		
_				
8. All Loans Received	0.0	0.0		
Loan Repayments Received	0.0	0.0		
Offsets To Operating Expenditures	, , , , , , , , , , , , , , , , , , , ,			
(Refunds, Rebates, etc.)				
(Carry Totals to Line 37, page 5)	0.0	0.0		
6. Refunds of Contributions Made				
to Federal Candidates and Other				
Political Committees	0.0	0.0		
7. Other Federal Receipts				
(Dividends, Interest, etc.)	0.0	0.0		
S. Transfers from Non-Federal and Levin Funds				
(a) Non-Federal Account	0.00	0.00		
(from Schedule H3)	0.00	0.00		
4) 1 . 5 . 4 . 6	0.00	0.00		
(b) Levin Funds (from Schedule H5)	0.00	0.00		
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00		
(c) Total Transfers (add To(a) and To(b))	0.00	0.00		
. Total Receipts (add Lines 11(d),				
12, 13, 14, 15, 16, 17, and 18(c))▶	0.0	1550.0		
. Total Federal Receipts				
(subtract Line 18(c) from Line 19)▶	0.0	1550.0		

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
Operating Expenditures: —— (a) Allocated Federal/Non-Federal	Total Time I dried	Galeridai Tear-10-Bate	
Activity (from Schedule H4)			
(i) Federal Share	0.00	0.00	
(ii) Non Fodeval Chara	0.00	0.00	
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00	
Expenditures	0.0	0.0	
(c) Total Operating Expenditures			
(add 21(a)(i), (a)(ii), and (b)) ▶	0.0	0.0	
Transfers to Affiliated/Other Party		0.0	
CommitteesContributions to	0.0	0.0	
Federal Candidates/Committees and Other Political Committees	4000.0	4000.0	
Independent Expenditures	0.0	0.0	
(use Schedule E) Coordinated Party Expenditures	0.0	0.0	
(2 U.S.C. §441a(d)) (use Schedule F)	0.0	0.0	
Loan Repayments Made	0.0	0.0	
Loans Made	0.00	0.00	
Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.0	0.0	
(b) Political Party Committees	0.0	0.0	
(c) Other Political Committees	0.0	0.0	
(such as PACs)	0.0		
(d) Total Contribution Refunds			
(add Lines 28(a), (b), and (c))▶	0.0	0.0	
Other Disbursements			
Other Disbursements	0.0	0.0	
Federal Election Activity (2 U.S.C. §431(20))			
(a) Allocated Federal Election Activity			
(from Schedule H6)			
(i) Federal Share	0.00	0.00	
	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add			
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00	
_	, , , , , , , , , , , , , , , , , , , ,	, , , , , , , , , , , , , , , , , , , ,	
Total Disbursements (add Lines 21(c), 22,			
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	4000.0	4000.0	
Total Federal Disbursements			
(subtract Line 21(a)(ii) and Line 30(a)(ii)			
from Line 31)	4000.0	4000.0	

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date	
3. Total Contributions (other than loans) (from Line 11(d), page 3)	0.0	1550.0	
4. Total Contribution Refunds (from Line 28(d))	0.0	0.0	
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.0	1550.0	
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.0	0.0	
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.0	0.0	
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.0	0.0	

## ľ

S	CHEDULE B (FEC Form 3X)		$\overline{\Box}$	FOR LINE N	IUMBER:	PAGE 6 OF 7
IT	EMIZED DISBURSEMENTS	Use separate schedule for each category of the		(check only one)		
		Detailed Summary Pag		21b 27	22 X 23 28b	24 25 26 28c 29 30b
Λ.	by information conicd from such Departs and Chata-	nonto mov not be cold as	uoca l			
	ny information copied from such Reports and Staten for commercial purposes, other than using the nam					
$\setminus$	NAME OF COMMITTEE (In Full)					
	National Association of Rehabilitati	on Providers &Ag	jenci	es Inc. Po	olitical Action C	Committee
_	Full Name (Last, First, Middle Initial)					
Α.	Ben Cardin for Senate				Date of Disbursem	
	Mailing Address PO Box 65056			07 06	2011	
	•	State Zip Code			Transaction ID :	1327346064714
		MD 21209			Transaction iD .	1327340904714
	Purpose of Disbursement PAC Political Contribution		Т	011	Amount of Each Di	isbursement this Period
	Candidate Name			Category/		1000.0
	Ben Cardin	and Fam. 2010		Туре		100.0
	X Senate	nent For: 2012 Primary Genera Other (specify)	l			
	State: MD District: 00					
	Full Name (Last, First, Middle Initial)					
B.	Cantor for Congress				Date of Disbursem	ent
	Mailing Address PO Box 17813				09 19 2011	
	Richmond	State Zip Code VA 23226			Transaction ID :	1327347282636
	Purpose of Disbursement PAC Political Contribution		lг	011	Amount of Each Di	isbursement this Period
	Candidate Name			Category/		1000.0
	Eric Ivan Cantor  Office Sought:  House Disbursen	nent For: 2012		Туре		
	Senate	Primary Genera Other (specify) ▼	I			
_	Full Name (Last, First, Middle Initial)					
C.	Hoyer for Congress				Date of Disbursem	ent
	Mailing Address 7905 Malcolm Road Suite 102				08 02	2011
	City	State Zip Code MD 20735			Transaction ID :	1327347211839
	Purpose of Disbursement PAC Political Contribution		Tr	011		
	Candidata Name			011	Amount of Each Di	isbursement this Period
	Steny H. Hoyer Category/					1000.0
	Office Sought:    House   Disbursen	nent For: 2012 Primary Genera Other (specify)	1	7,1		
_	State: MD District: 05					
s	SUBTOTAL of Disbursements This Page (optional)			·····•		3000.00
1	OTAL This Period (last page this line number only)					7

SCHEDULE B (FEC Form 3X)			NUMBER: PAGE 7 OF 7	
TEMIZED DISBURSEMENTS	Use separate schedule(s)			
LIVIIZED DISDONSLIVILIVIS	for each category of the Detailed Summary Page	21b	22 🗙 23 24 25 26	
	Detailed Suffilliary Fage	27	28a 28b 28c 29 30	
Any information copied from such Reports and St				
or for commercial purposes, other than using the	name and address of any politic	cal committee to	solicit contributions from such committee.	
NAME OF COMMITTEE (In Full)				
igr > National Association of Rehabili	ation Providers &Agei	ncies Inc. P	olitical Action Committee	
Full Name (Last, First, Middle Initial)				
. The Hawkeye PAC	,			
	M M / D D / Y Y Y Y			
Mailing Address PO Box 7255	07 07 2011			
City	City State Zip Code			
Des Moines	IA 50309		Transaction ID: 1327347122839	
Purpose of Disbursement				
PAC Political Contribution		011	Amount of Each Disbursement this Period	
Candidate Name		Category/	1000.0	
Office Cought	and the second s	Type	1000.0	
Office Sought: House Disbu	sement For:    Primary   General			
President	Other (specify)			
State: District:	Canon (openiny)			
Full Name (Last, First, Middle Initial)				
( , ,			Date of Disbursement	
			M = M / D = D / Y = Y = Y	
Mailing Address				
City	State Zip Code			
Only	otato Zip oode			
Purpose of Disbursement				
			Amount of Each Disbursement this Period	
Candidate Name		Category/		
Office Sought: House Disbu	sement For:	Type		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)				
<b>&gt;</b> .	Date of Disbursement			
Mailing Address			M M / D D / Y Y Y Y	
Mailing Address				
City	City State Zip Code			
urpose of Disbursement				
Candidate Name			Amount of Each Disbursement this Period	
Candidate Name		Category/ Type		
Office Sought: House Disbu	sement For:	7,700		
Senate	Primary General			
President	Other (specify) ▼			
State: District:				
			1000.00	
State: District:  SUBTOTAL of Disbursements This Page (options)		<b>&gt;</b>	1000.00	